Fill in this i	Fill in this information to identify the case:						
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭						
Debtor 2 (Spouse, if filing)							
United States Bankruptcy Court for the: Southern District of New York							
Case number	09-50026 (REG)						

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	Useph Perrino Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom					
	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman  Name  1885 St. James Place, 15th Floor			Where should payments to the creditor be sent? (if different)		
		Number Street Houston	TX	77056	Number S	Street	
		Contact phone 713-85  Contact email Lnorms		ZIP Code myers.com	City  Contact phone  Contact email	State	
		Uniform claim identifier fo	r electronic payme	nts in chapter 13 (if you u	se one):		
	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	er on court claim	s registry (if known)		Filed on	D / YYYY
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made t	ne earlier filing?				

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	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	sunliquidated Does this amount include interest or other charges?
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	Viaini.	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
		Limit disclosing information that is entitled to privacy, such as health care information.
		Personal injury claim - ignition switch
— ).	Is all or part of the claim	<b>☑</b> No
	secured?	Yes. The claim is secured by a lien on property.
		Nature of property:
		Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim
		Attachment (Official Form 410-A) with this Proof of Claim.
		☐ Motor vehicle☐ Other. Describe:
		Basis for perfection:
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for
		example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
		Value of property: \$
		Amount of the claim that is secured: \$
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.)
		Amount necessary to cure any default as of the date of the petition:
		Annual Interest Rate (when case was filed)%
		Fixed
		☐ Variable
0.	Is this claim based on a	<b>1</b> No
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.
1.	Is this claim subject to a	<b>☑</b> No
	right of setoff?	☐ Yes. Identify the property:
		, p.opo.ij.

# 09-50026-mg Doc 14112-5 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-4 Pg 3 of 56

12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Chec	k one:	Amount entitled to priorit			
A claim may be partly priority and partly		tic support obligations (including alimony and child support) under .C. § 507(a)(1)(A) or (a)(1)(B).	\$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		$2,850^*$ of deposits toward purchase, lease, or rental of property or services for al, family, or household use. 11 U.S.C. § $507(a)(7)$ .	\$			
chilica to priority.	bankru	, salaries, or commissions (up to \$12,850*) earned within 180 days before the ptcy petition is filed or the debtor's business ends, whichever is earlier. C. § 507(a)(4).	\$			
	_	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$			
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$			
	Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$			
	* Amounts	are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or a	fter the date of adjustment.			
Part 3: Sign Below						
Part 5: Sign Below						
The person completing this proof of claim must	Check the appro	opriate box:				
sign and date it. FRBP 9011(b).	☐ I am the cr☐ I am the cr☐					
f you file this claim	_	editor's attorney or authorized agent.				
electronically, FRBP	☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. ☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
5005(a)(2) authorizes courts to establish local rules						
specifying what a signature is.		at an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgmen				
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 08/24/2017					
		0				
	/s/ Lisa N	1. Norman Sisam. Dorman				
	Print the name	of the person who is completing and signing this claim:				
	Name	Lisa M. Norman				
		First name Middle name Last name				
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the company if the authorized agent is a servicer.				
	Address	1885 St. James Place, 15th Floor				
		Number Street				
		Houston TX 77056				
		City State ZIP Code				
	Contact phone	713-850-4200 Email Lnorman@ar	ndrewsmyers.com			

Last Name of Claimant	Perrino
First Name of Claimant	Joseph
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Tampa, Florida
Accident Description	Claimant was driving a vehicle that was pushed into another vehicle,
	resulting in severe and permanent injuries to Claimant
Injury Description	Closed Head Injury; Concussion; Loss of Consciousness; Stitches;
	Neck Pain; Headaches
Airbag Deployed	No
Date of Injury	02/16/07
Year and Model of Vehicle	2006 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this in	nformation to identify the case:				
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors <b>௸</b>				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Southern District of New York					
Case number	09-50026 (REG)				

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Who is the current creditor?	Kathleen Perrino  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor					
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	n?				
Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman  Name  1885 St. James Place, 15th Floor			Where should payments to the creditor be sent? (if different)		
	Number Street Houston City Contact phone 713-8 Contact email Lnorn		77056 ZIP Code myers.com	City  Contact phone  Contact email	t State	
	Uniform claim identifier		nts in chapter 13 (if you u			
Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court claim	s registry (if known)		Filed on MM / D	DD / YYYY
Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?				

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6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	What Is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch
Э.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.    Motor vehicle
10	Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.  \$
1.	Is this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:

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2. Is all or part of the claim	<b>☑</b> No						
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Che	eck one:		Amount entitled to priorit			
A claim may be partly priority and partly	Dom 11 U	s					
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		\$2,850* of deposits toward purchase, lead on al, family, or household use. 11 U.S.C.		services for \$			
chalca to phonty.	bank	es, salaries, or commissions (up to \$12,85 ruptcy petition is filed or the debtor's busin .S.C. § 507(a)(4).					
		s or penalties owed to governmental units	s. 11 U.S.C. § 507(a)(8).	\$			
	☐ Cont	ributions to an employee benefit plan. 11	U.S.C. 8 507(a)(5)	\$			
	_	r. Specify subsection of 11 U.S.C. § 507(a		\$			
				Ψ			
	* Amoun	ts are subject to adjustment on 4/01/19 and eve	ery 3 years after that for cases	s begun on or after the date of adjustment.			
Part 3: Sign Below							
The person completing this proof of claim must	Check the ap	propriate box:					
sign and date it.	,						
FRBP 9011(b).	I am the creditor's attorney or authorized agent.						
f you file this claim electronically, FRBP	_	trustee, or the debtor, or their authorized					
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the						
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on date 08/24/2017						
		•					
	/s/ Lisa		n. Norma	n			
	J.g	3-0					
	Print the nan	ne of the person who is completing and	d signing this claim:				
	Name	Lisa M. Norman	1-1	1 4			
			le name	Last name			
	Title	Attorney					
	Company	Andrews Myers, PC					
		Identify the corporate servicer as the com	pany if the authorized agent	is a servicer			
	Address	1885 St. James Place, 15th	Floor				
	·	Number Street					
		Houston	TX	77056			

Last Name of Claimant	Perrino
First Name of Claimant	Kathleen
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Tampa, Florida
Accident Description	Claimant was a passenger in a vehicle that was pushed into another vehicle, resulting in severe and permanent injuries to Claimant
Injury Description	Neck Injury
Airbag Deployed	No
Date of Injury	02/16/07
Year and Model of Vehicle	2006 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this in	nformation to identify the case:
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭
Debtor 2 (Spouse, if filing	
United States	Bankruptcy Court for the: Southern District of New York
Case number	09-50026 (REG)

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	David Pier  Name of the current creditor (the person or entity to be paid for this claim)						
		Other names the credit	or used with the debt	tor				
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes, From who	m?					
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman			Where should payments to the creditor be sent? (if different)			
	Federal Rule of Bankruptcy Procedure	Name			Name			
	(FRBP) 2002(g)	1885 St. James Place, 15th Floor						
		Number Street		Number Street				
		Houston	TX	77056				
		City  Contact phone 713-8	State 350-4200	ZIP Code	City  Contact phone	State	ZIP Code	
		Uniform claim identifier for electronic payments in chapter 13 (if you u						
	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	nber on court claim	ns registry (if known) _		Filed on MM / DE	D / YYYY	
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	e the earlier filing?					

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	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:				
	How much is the claim?	Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch				
		- ersonal injury claim - ignition switch				
	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property:  Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim  Attachment (Official Form 410-A) with this Proof of Claim.  Motor vehicle Other. Describe:				
		Basis for perfection:  Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)				
		Value of property:				
		Amount of the claim that is secured: \$				
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7				
		Amount necessary to cure any default as of the date of the petition: \$				
		Annual Interest Rate (when case was filed)%  □ Fixed □ Variable				
0	. Is this claim based on a	<b>☑</b> No				
•	lease?	Yes. Amount necessary to cure any default as of the date of the petition.				
	ls this claim subject to a	<b>☑</b> No				
1						

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12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	cone:				Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).					\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ persona	\$				
endied to priority.	bankruj	salaries, or commissions (up to otcy petition is filed or the debtor C. § 507(a)(4).	\$12,850*) earned withits business ends, which	in 180 d never is	lays before the earlier.	\$
	_	or penalties owed to government	al units. 11 U.S.C. § 50	)7(a)(8).		\$
	☐ Contrib	utions to an employee benefit pla	an. 11 U.S.C. § 507(a)(	(5).		\$
	_	Specify subsection of 11 U.S.C.				\$
		are subject to adjustment on 4/01/19			ses begun on or afte	er the date of adjustment,
Part 3: Sign Below						
The person completing	Check the appro	opriate box:				
this proof of claim must	□	_ dit a _				
sign and date it. FRBP 9011(b).	☐ I am the creditor. ☐ I am the creditor's attorney or authorized agent.					
• •	_	editor's attorney or authorized ag			0004	
If you file this claim electronically, FRBP	_	istee, or the debtor, or their auth	-	•		
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the					
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 09/19/2017					
	/s/ Lisa N	1. Norman	am.Dox	Sm	an	
	Print the name	of the person who is completi	ng and signing this c	laim:		
	Name	Lisa M. Norman	Middle name		Last name	
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as	the company if the authori	ized agei	nt is a servicer	
	Address	1885 St. James Place,	15th Floor			
	***	Number Street				
		Houston		TX	77056	
		City		State	ZIP Code	
	Contact phone	713-850-4200		Email	norman@and	drewsmyers.com

Last Name of Claimant	Pier
First Name of Claimant	David
N COL	
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Suffolk, VA
Accident Description	Son of claimant, Joshua, fell asleep while driving, veered off the road and hit a tree
Injury Description	Left broken femur, lacerated aorta, died as a result of his injuries
Airbag Deployed	No
Date of Injury	01/16/2005
Year and Model of Vehicle	1997 Pontiac Grand Am
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:								
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭							
Debtor 2 (Spouse, if filing								
United States Bankruptcy Court for the: Southern District of New York								
Case number	09-50026 (REG)							

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

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Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

	o is the current ditor?	Jibreel Riley  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor						
acq	s this claim been quired from neone else?	☑ No ☐ Yes. From who	m?					
and	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should noti			Name			
Bar		Name 1885 St. James						
		Number Street		Number Street				
		Houston City	TX State	77056 ZIP Code	City	State	ZIP Code	
		Contact phone 713-		211 3343	<u> </u>			
		Contact email Lnorman@andrewsmyers.com			Contact email		-	
		Uniform claim identifie	r for electronic payme	nts in chapter 13 (if you u	se one):			
	es this claim amend e already filed?	☑ No ☐ Yes. Claim nur	nber on court claim	s registry (if known)		Filed on	D / YYYY	
else	you know if anyone e has filed a proof claim for this claim?	☑ No ☐ Yes. Who mad	e the earlier filing?					

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<b>S</b> .	Do you have any number you use to identify the debtor?	No Pes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
	How much is the claim?	Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch
	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property:  Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.  Motor vehicle Other. Describe:  Basis for perfection:  Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
		Value of property:  Amount of the claim that is secured:  Amount of the claim that is unsecured:  (The sum of the secured and unsecured amounts should match the amount in line 7
		Amount necessary to cure any default as of the date of the petition: \$
		Annual Interest Rate (when case was filed)%  □ Fixed □ Variable
	Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.  \$
١.	Is this claim subject to a right of setoff?	☑ No ☐ Yes. Identify the property:

# 09-50026-mg Doc 14112-5 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-4 Pg 15 of 56

12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	k one:				Amount entitled to priorit
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).					\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ personal	2,850* of deposits toward purch al, family, or household use. 11	ase, lease, or rental o J.S.C. § 507(a)(7).	f property o	r services for	\$
cinnot to priority.	bankruj	, salaries, or commissions (up to ptcy petition is filed or the debtor .C. § 507(a)(4).	\$12,850*) earned wit 's business ends, whi	hin 180 day chever is ea	rs before the arlier.	\$
	☐ Taxes	or penalties owed to governmen	tal units. 11 U.S.C. § 8	507(a)(8).		\$
	☐ Contrib	utions to an employee benefit pl	an. 11 U.S.C. § 507(a	)(5).		\$
	Other.	Specify subsection of 11 U.S.C.	§ 507(a)() that app	ies.		\$
	* Amounts	are subject to adjustment on 4/01/19	and every 3 years after	hat for cases	begun on or aft	er the date of adjustment.
Part 3: Sign Below						
The person completing	Check the appro	opriate box:				
this proof of claim must sign and date it.	☐ I am the cr	editor				
FRBP 9011(b).		editor's attorney or authorized a	ant			
If you file this claim	_	•	-	stev Bule 3	204	
electronically, FRBP						
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules specifying what a signature						
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	d the information in this <i>Proof of</i>	Claim and have a rea	sonable be	lief that the info	ormation is true
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under	penalty of perjury that the forego	oing is true and correc	t.		
3571.	Executed on da	d on date 09/19/2017				
	/s/ Lisa N	M. Norman	UM D&	uma	v.	
	Print the name	of the person who is complet	ing and signing this	claim:		
	Name	Lisa M. Norman First name	Middle name		Last name	
	Title	Attorney				
	Company	Andrews Myers, PC	4			
		Identify the corporate servicer as	trie company if the author	orized agent i	s a servicer.	
	Address	1885 St. James Place,	15th Floor			
		Number Street		-14		
		Houston		TX	77056	
		City		State	ZIP Code	
	Contact phone	713-850-4200		<sub>Email</sub> Ln	orman@and	drewsmyers.com

Last Name of Claimant	Riley
First Name of Claimant	Jibreel
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Buffalo, New York
Accident Description	Claimant was a driver when his car was hit on driver's side by delivery van.
Injury Description	Injuries to his elbow and head.
Airbag Deployed	No
Date of Injury	6/18/2007
Year and Model of Vehicle	2006 Chevy Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:								
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭							
Debtor 2 (Spouse, if filing)								
United States	Bankruptcy Court for the: Southern District of New York							
Case number	09-50026 (REG)							

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Who is the current creditor?	Antonio Rivers  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor					
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whor	n?				
Where should notices and payments to the creditor be sent?	Where should notice Andrews Myers,			Where should payments to the creditor be sent? (if different)		
Bankruptcy Procedure (FRBP) 2002(g)	1885 St. James Place, 15th Floor Number Street Houston TX 77056		Number Street			
	City	State 50-4200	ZIP Code		State	
	Uniform claim identifier		nts in chapter 13 (if you u			
Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court claim	s registry (if known)		Filed on	O / YYYY
Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?	-			

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3.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:				
7.	How much is the claim?	Does this amount include interest or other charges?  ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.				
٠.	claim?	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).				
		Limit disclosing information that is entitled to privacy, such as health care information.				
		Limit disclosing information that is entitled to privacy, such as health care morniation.				
		Personal injury claim - ignition switch				
),	Is all or part of the claim	Ø No				
	secured?	☐ Yes. The claim is secured by a lien on property.				
		Nature of property:				
		☐ Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim  Attachment (Official Form 410-A) with this Proof of Claim.				
		Motor vehicle				
		Other. Describe:				
		Basis for perfection:				
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)				
		Value of property: \$				
		Amount of the claim that is secured: \$				
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.				
		Amount necessary to cure any default as of the date of the petition: \$				
		Annual Interest Rate (when case was filed)%				
		Fixed				
		☐ Variable				
0.	Is this claim based on a	<b>☑</b> No				
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.				
1.	Is this claim subject to a	<b>☑</b> No				
	right of setoff?					
		☐ Yes. Identify the property:				

# 09-50026-mg Doc 14112-5 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-4 Pg 19 of 56

12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	cone:	Amount entitled to priority			
A claim may be partly priority and partly		tic support obligations (including alimony and child support) under C. § 507(a)(1)(A) or (a)(1)(B).	\$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		2,850* of deposits toward purchase, lease, or rental of property or services for al, family, or household use. 11 U.S.C. § $507(a)(7)$ .	\$			
ontition to priority.	bankruj	salaries, or commissions (up to \$12,850*) earned within 180 days before the otcy petition is filed or the debtor's business ends, whichever is earlier. C. § 507(a)(4).	\$			
	Taxes of	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$			
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$			
	Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$			
	* Amounts	are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or af	ter the date of adjustment.			
Part 3: Sign Below						
The person completing	Check the appro	poriate box:				
this proof of claim must	☐ I am the cre	'				
sign and date it. FRBP 9011(b).	I am the cre					
If you file this claim	_	istee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	_	rantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the					
	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 08/24/2017					
	MM / DU / YYYY					
	/s/ Lisa N	1. Norman Sisam. Norman				
	Print the name	of the person who is completing and signing this claim:				
	Name	Lisa M. Norman				
		First name Middle name Last name				
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the company if the authorized agent is a servicer.				
	Address	1885 St. James Place, 15th Floor				
	, 144, 000	Number Street				
		Houston TX 77056				
		City State ZIP Code				
	Contact phone	713-850-4200 Email Lnorman@an	drewsmyers.com			

Last Name of Claimant	Rivers
First Name of Claimant	Antonio
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Clovis, NM
Accident Description	While driving Antonio lost control of the vehicle and flipped twice.
Injury Description	Shoulder pain, right lower leg pain
Airbag Deployed	No
Date of Injury	03/28/05
Year and Model of Vehicle	2005 Chevrolet Cobalt LS
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Filed, GM MDL
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1	otor 1 Motors Liquidation Company, et al. f/k/a General Motors €			
Debtor 2 (Spouse, if filing				
United States	Bankruptcy Court for the: Southern District of New York			
Case number	09-50026 (REG)			

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1:	Identify the C	laim					
1. Who i	is the current tor?	Valerie Roberts  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor					
acqui	his claim been ired from one else?	✓ No ☐ Yes. From who	m?				
and p credit Feder Bankr	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman  Name  1885 St. James Place, 15th Floor			Where should payments to the creditor be sent? (if different)		
(FKBI		Number Street		Number Street			
		Contact email Lnor		77056  ZIP Code  myers.com	Contact email	State	
	this claim amend dready filed?	✓ No □ Yes. Claim nur		s registry (if known)		Filed on	/ YYYY
else t	ou know if anyone has filed a proof him for this claim?	☑ No ☐ Yes. Who mad	e the earlier filing?				

# 09-50026-mg Doc 14112-5 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-4 Pg 22 of 56

<b>S</b> .	Do you have any number you use to identify the debtor?	No Ses. Last 4 digits of the debtor's account or any number you use to identify the debtor:				
	How much is the claim?	\$ Unique Does this amount include interest or other charges? ☐ No				
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card,				
	claim?	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).				
		Limit disclosing information that is entitled to privacy, such as health care information.				
		Personal injury claim - ignition switch				
	Is all or part of the claim	₩ No				
	secured?	Yes. The claim is secured by a lien on property.				
		Nature of property:				
		Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim				
		Attachment (Official Form 410-A) with this Proof of Claim.  ☐ Motor vehicle				
		Other, Describe:				
		Basis for perfection:				
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)				
		Value of property: \$				
		Amount of the claim that is secured: \$				
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.				
		Amount necessary to cure any default as of the date of the petition:				
		A state of Details to be a second filed)				
		Annual Interest Rate (when case was filed)%				
		☐ Fixed ☐ Variable				
0.	. Is this claim based on a	<b>☑</b> No				
lease?		☐ Yes. Amount necessary to cure any default as of the date of the petition. \$				
1.	Is this claim subject to a	<b>☑</b> No				
11.	right of setoff?	☐ Yes. Identify the property:				
		Tes. identity the property.				

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12. Is all or part of the claim entitled to priority under	☑ No					
11 U.S.C. § 507(a)?	Yes. Check	one:				Amount entitled to priori
A claim may be partly priority and partly		tic support obligations (in C. § 507(a)(1)(A) or (a)(1	cluding alimony and child (B).	support) unde	er	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.			d purchase, lease, or renta se. 11 U.S.C. § 507(a)(7).		or services for	\$
,,,	bankrup	salaries, or commission of the	s (up to \$12,850*) earned debtor's business ends,	within 180 da whichever is e	ays before the earlier.	\$
	Taxes of	or penalties owed to gove	rnmental units. 11 U.S.C.	§ 507(a)(8).		\$
	☐ Contrib	utions to an employee be	enefit plan. 11 U.S.C. § 50	7(a)(5)		\$
	_					\$
	U Otner.	Specify subsection of 11	U.S.C. § 507(a)() that a	ipplies.		Ψ
	* Amounts a	are subject to adjustment on	4/01/19 and every 3 years af	ter that for case	es begun on or aft	er the date of adjustment.
Part 3: Sign Below						
The person completing	Check the appro	opriate box:				
this proof of claim must sign and date it.	☐ I am the cre	ditor				
FRBP 9011(b).		editor's attorney or autho	rized agent			
If you file this claim	_	-	-	cruptov Rule 3	3004.	
electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
5005(a)(2) authorizes courts to establish local rules						
specifying what a signature		at an authorized signature aim, the creditor gave the	e on this <i>Proof of Claim</i> se e debtor credit for any pay	erves as an ac	cknowledgment ed toward the d	that when calculating the lebt.
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the information in this F	Proof of Claim and have a	reasonable b		
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 08/24/2017					
	Signature	1. Norman	1 101	man	_	
	Print the name of the person who is completing and signing this claim:					
	Name	Lisa M. Norman	Middle name		Last name	
	Title	Attorney				
	Company Andrews Myers, PC					
	•	identify the corporate ser	vicer as the company if the a	uthorized agen	t is a servicer.	
	Address	1885 St. James F	Place, 15th Floor			
	. 1441-050	Number Street				
		Houston		TX	77056	
		City		State	ZIP Code	
	Contact phone	713-850-4200		Email LI	norman@an	drewsmyers.com

Last Name of Claimant	Roberts
First Name of Claimant	Valare
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Wilmington, DE
Accident Description	Was driving approx. 25 mph when Valerie was cut off and she T-bones another vehicle.
Injury Description	Torn left vertebrae, neck pain, right arm/shoulder pain, lower back pain
Airbag Deployed	No
Date of Injury	03/23/07
Year and Model of Vehicle	2003 Cadillac CTS
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Filed, GM MDL
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭			
Debtor 2 (Spouse, if filing	Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the: Southern District of New York				
Case number	09-50026 (REG)			

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

P	art 1: Identify the Cl	aim					
1.	Who is the current creditor?	Name of the current cre	Raeann Rutledge  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor				
2.	Has this claim been acquired from someone else?	✓ No ☐ Yes. From who	m?				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman  Name  1885 St. James Place, 15th Floor			Where should payments to the creditor be sent? (if different)		be sent? (if
		Number Street Houston	TX	77056	Number Stree	t	
		City  Contact phone 713-6  Contact email Lnorth		ZIP Code	City  Contact phone  Contact email	State	
		Uniform claim identifie		ents in chapter 13 (if you u			
	Does this claim amend one already filed?	☑ No ☐ Yes, Claim num	nber on court claim	ns registry (if known) _		Filed on MM / DI	O / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	e the earlier filing?				

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6.	Do you have any number you use to identify the debtor?	No See Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is the claim?	SUN Does this amount include interest or other charges?  ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).		
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch		
).	Is all or part of the claim secured?	No		
0	Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.  \$		
1	Is this claim subject to a right of setoff?	✓ No  ☐ Yes. Identify the property:		

Official Form 410

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12. Is all or part of the claim	<b>☑</b> No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	r one:	Amount entitled to priority			
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).					
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).					
endica to priority.	bankrup	salaries, or commissions (up to \$12,850*) earned within 180 otcy petition is filed or the debtor's business ends, whichever to C. § 507(a)(4).				
	☐ Taxes o	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8	\$			
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$			
	_	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$			
		· ·				
	* Amounts a	are subject to adjustment on 4/01/19 and every 3 years after that for c	ases begun on or after the date of adjustment.			
Part 3: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must sign and date it.	☐ I am the cre	editor.				
FRBP 9011(b).		editor's attorney or authorized agent.				
If you file this claim electronically, FRBP	_	am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
5005(a)(2) authorizes courts to establish local rules	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
specifying what a signature		t an authorized signature on this <i>Proof of Claim</i> serves as an	acknowledgment that when calculating the			
is.  A person who files a		aim, the creditor gave the debtor credit for any payments rece				
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the information in this <i>Proof of Claim</i> and have a reasonable	belief that the information is true			
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on dat	e 08/24/2017				
	LXCCuted on da	MM / DD / YYYY				
	/s/ Lisa N	1. Norman Sisam. Norman	<u>)                                    </u>			
	Print the name	of the person who is completing and signing this claim:				
	Name	Lisa M. Norman First name Middle name	Last name			
	Title	Attorney				
	Company	Andrews Myers, PC				
	•	Identify the corporate servicer as the company if the authorized ag	ent is a servicer.			
		1885 St. James Place 15th Floor				
	Address	1885 St. James Place, 15th Floor  Number Street				
		Houston TX	77056			
		City State	ZIP Code			
	Contact phone	713-850-4200 Email	Lnorman@andrewsmyers.com			

Last Name of Claimant	Rutledge
First Name of Claimant	Raeann
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Pueblo, Colorado
Accident Description	Claimant was the driver of a vehicle who lost control and struck a median, resulting in severe and permanent injuries to Claimant
Injury Description	Head trauma, left frotal lobe damage; two broken wrists; scalp reconstruction; wrist surgery; spinal cord stimulator
Airbag Deployed	No
Date of Injury	01/18/05
Year and Model of Vehicle	2004 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1	tor 1 Motors Liquidation Company, et al. f/k/a General Motors 😭			
Debtor 2 (Spouse, if filing)	Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the: Southern District of New York				
Case number	09-50026 (REG)			

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	Lloyd Shaffer  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor				
2.	Has this claim been acquired from someone else?					
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman	Where should payments to the creditor be sent? (if different)			
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James Place, 15th Floor	Name			
		Number Street	Number Street			
		Houston TX 77056				
		Contact phone 713-850-4200  Contact email Lnorman@andrewsmyers.com	City State ZIP Code  Contact phone  Contact email			
		Uniform claim identifier for electronic payments in chapter 13 (if you the second sec	use one):			
	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed onMM / DD / YYYY			
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?				

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6.	Do you have any number you use to Identify the debtor?	No See Last 4 digits of the debtor's account or any number you use to identify the debtor:
	How much is the claim?	Does this amount include interest or other charges?  ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch
	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.    Motor vehicle
	Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.  ⑤ No
1.	Yes. Identify the property:	

Official Form 410 Proof of Claim

page 2

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12. Is all or part of the claim	☑ No						
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority			
A claim may be partly priority and partly		c support obligations (including alimony $\mathbb{C}. \ \S 507(a)(1)(A) \ \text{or} \ (a)(1)(B).$	and child support) unde	s			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2 persons	Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).					
endied to phonty.	☐ Wages, bankrup 11 U.S.	ys before the arlier. \$					
	_	penalties owed to governmental units.	11 U.S.C. § 507(a)(8).	\$			
	Contribu	tions to an employee benefit plan. 11 U	S.C. & 507(a)(5)	s			
	_			•			
	☐ Other. §	pecify subsection of 11 U.S.C. § 507(a)	() that applies.	3			
	* Amounts a	re subject to adjustment on 4/01/19 and ever	/ 3 years after that for case	s begun on or after the date of adjustment.			
Part 3: Sign Below							
The person completing	Check the appro	priate box:					
this proof of claim must sign and date it.	☐ I am the creditor.						
FRBP 9011(b).	I am the cre	ditor's attorney or authorized agent.					
If you file this claim electronically, FRBP	l am the tru	tee, or the debtor, or their authorized a	gent. Bankruptcy Rule 3	004.			
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules specifying what a signature							
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on dat						
	/s/ Lisa M	. Norman Sisam	.Noema	U			
	Print the name	of the person who is completing and	signing this claim:				
	Name	Lisa M. Norman First name Middle	name	Last name			
	Title	Attorney					
	Company	Andrews Myers, PC					
	. ,	Identify the corporate servicer as the comp	any if the authorized agent	is a servicer.			
	Address	1885 St. James Place, 15th F	oor				
		Number Street		77050			
		Houston	TX	77056			
		City	State	ZIP Code			
	Contact phone	713-850-4200	<sub>Email</sub> Ln	orman@andrewsmyers.com			

Last Name of Claimant	Shaffer		
First Name of Claimant	Lloyd		
Nature of Claim	Personal injuries arising out of motor vehicle accident		
Accident Location	Yazoo City, Mississippi		
Accident Description	Claimant was a passenger in a vehicle that lost control, resulting in		
	serious and permanent injuries to Claimant		
Injury Description	Broken ribs, Broken Collar Bone; Burns on arms and face, head		
	trauma, back and leg injuries, memory loss		
Airbag Deployed	Yes		
Date of Injury	02/14/09		
Date of Injury	02/14/07		
Year and Model of Vehicle	2006 Pontiac Grand Prix		
Amount of Claim	To be determined (unliquidated)		
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY		
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").		
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.		
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.		

Fill in this information to identify the case:					
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭				
Debtor 2 (Spouse, if filing					
United States	Bankruptcy Court for the: Southern District of New York				
Case number	09-50026 (REG)				

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim						
. Who is the current creditor?	Maurice Shaffer  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor					
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom					
Where should notices and payments to the creditor be sent?  Federal Rule of	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman			different)	yments to the creditor	r be sent? (if
Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James Place, 15th Floor			Name		
	Number Street	TX	77056	Number Stree	et	
	Houston	State	ZIP Code	City	State	ZIP Code
	Contact phone 713-8			47.0		
	Contact email Lnorm	an@andrews	myers.com	Contact email		_
	Uniform claim identifier f	, ,	nts in chapter 13 (if you u			
Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	per on court claim	s registry (if known) _		Filed on MM / D	DD / YYYY
Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?	7			

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	Do you have any number you use to identify the debtor?	☑ No ☐ Yes. Las	t 4 digits of the debtor's account or any	number you use to ident	ify the debtor:		
	How much is the claim?	sler	liquidated Does this	amount include intere	st or other charges?		
			Yes. A	attach statement itemizin harges required by Banl	g interest, fees, expenses, or other kruptcy Rule 3001(c)(2)(A).		
	What is the basis of the claim?		Goods sold, money loaned, lease, service				
		lankruptcy Rule 3001(c).					
Limit disclosing information that is entitled to privacy, such as health care information.							
		Personal injury claim - ignition switch					
	Is all or part of the claim	Ø No Ti		301			
	Seculeur		ne claim is secured by a lien on property	•			
			ature of property:  Real estate. If the claim is secured by	the debter's principal re	ridance file a Mortgage Proof of Claim		
		_	Attachment (Official Form				
			Motor vehicle				
		u	Other. Describe:				
		Basis for perfection:  Attach redacted copies of documents, if any, that show evidence of perfection of a security int					
		ex be	or other document that shows the lien has				
		Va	alue of property:	\$	-/		
		Ar	mount of the claim that is secured:	\$	-		
		Ar	mount of the claim that is unsecured:	\$	_(The sum of the secured and unsecured amounts should match the amount in line 7		
		Ar	mount necessary to cure any default	as of the date of the pe	etition: \$		
				•	etition: \$		
		Ar	nnual Interest Rate (when case was file	•	etition: \$		
		<b>A</b> r □		•	etition: \$		
).	Is this claim based on a	<b>A</b> r □	nnual Interest Rate (when case was file	•	etition: \$		
).	Is this claim based on a lease?	Ar	nnual Interest Rate (when case was file	ed)%			
	lease?	Ar	nnual Interest Rate (when case was file Fixed Variable	ed)%			
	lease?	Ar  No Yes. Am	nnual Interest Rate (when case was file Fixed Variable	s of the date of the pet	ition. \$		

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12. Is all or part of the claim							
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	Amount entitled to price					
A claim may be partly priority and partly		ic support obligations (including alimo C. § 507(a)(1)(A) or (a)(1)(B).	ony and child support) un	der \$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).					
children to priority.	☐ Wages, bankrup 11 U.S.	days before the searlier.					
	☐ Taxes o	or penalties owed to governmental uni	ts. 11 U.S.C. § 507(a)(8)	. \$			
	Contrib	utions to an employee benefit plan. 1	U.S.C. 8 507(a)(5)	s			
	_			*			
	U Other.	specify subsection of 11 U.S.C. § 507(a)() that applies.		<b>a</b>			
	* Amounts	are subject to adjustment on 4/01/19 and e	very 3 years after that for ca	ses begun on or after the date of adjustment.			
Part 3: Sign Below							
The person completing	Check the appro	priate box:					
this proof of claim must sign and date it.	l am the cre	editor					
FRBP 9011(b).	I am the creditor.  I am the creditor's attorney or authorized agent.						
If you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.						
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on date 08/24/2017						
	/s/ Lisa N	1. Norman Sixsa (	n. Norma	20			
	Print the name of the person who is completing and signing this claim:						
	Name	Lisa M. Norman First name Mid	idle name	Last name			
	Title	Attorney					
	Company	Andrews Myers, PC					
	2	Identify the corporate servicer as the co	mpany if the authorized age	nt is a servicer			
	Address 1885 St. James Place, 15th Floor						
		Number Street		77050			
		Houston	TX	77056			
		City	State	ZIP Code			
	Contact phone	713-850-4200	Fmail L	_norman@andrewsmyers.com			

Last Name of Claimant	Shaffer, Deceased
First Name of Claimant	Maurice
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Yazoo City, Mississippi
Accident Description	Claimant lost control of his vehicle, resulting in fatal injuries to Claimant
Injury Description	Death
Airbag Deployed	Yes
Date of Injury	02/14/09
Year and Model of Vehicle	2006 Pontiac Grand Prix
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:						
Debtor 1 Motors Liquidation Company, et al. f/k/a General Mot						
Debtor 2 (Spouse, if filing	-					
United States	Bankruptcy Court for the: Southern District of New York					
Case number	09-50026 (REG)					

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

١.	Who is the current creditor?	Dawn Simecek							
	CIGUILOIT	Name of the current creditor (the person or entity to be paid for this claim)							
		Other names the credito	r used with the debt	or					
	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	1?						
	Where should notices and payments to the creditor be sent?	Where should notic			Where should payments to the creditor be different)		r be sent? (if		
	Federal Rule of	Andrews Myers,	PC - ATTN: L	isa M. Norman					
	Bankruptcy Procedure	Name			Name				
	(FRBP) 2002(g)	1885 St. James	Place, 15th Flo	oor					
		Number Street		78050	Number	Street			
		Houston	TX	77056	0"	01.1	710.0-1-		
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone 713-8	50-4200		Contact phone	-			
		Contact email Lnorm		mvers.com	Contact email				
		Contact entall				_			
		Uniform claim identifier for electronic payments in chapter 13 (if you use one):							
	Does this claim amend	☑ No							
	one already filed?	☐ Yes. Claim num	ber on court claim	s registry (if known) _		Filed on MM / C	DD / YYYY		
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?						

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6.	Do you have any number you use to identify the debtor?	No   Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.	How much is the claim?						
8.	What Is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch					
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.  Motor vehicle Other. Describe:  Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  Value of property:  Amount of the claim that is secured:  Amount of the claim that is unsecured:  Amount of the claim that is unsecured:  Amount necessary to cure any default as of the date of the petition:  Annual Interest Rate (when case was filed) Fixed Variable					
10.	Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.					
11.	Is this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:					

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	☑ No ☐ Yes. Check	cone:	Amount entitled to priority				
A claim may be partly priority and partly		ic support obligations (including alimony and child support) under C. § 507(a)(1)(A) or (a)(1)(B).	\$				
nonpriority. For example, in some categories, the law limits the amount		2,850* of deposits toward purchase, lease, or rental of property or services for al, family, or household use. 11 U.S.C. § 507(a)(7).	\$				
entitled to priority.	bankruj	salaries, or commissions (up to \$12,850*) earned within 180 days before the otcy petition is filed or the debtor's business ends, whichever is earlier.  C. § 507(a)(4).	\$				
	☐ Taxes o	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$				
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$				
	Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$				
	* Amounts	are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or	after the date of adjustment				
Part 3: Sign Below							
The person completing this proof of claim must	Check the appro	ppriate box:					
sign and date it. FRBP 9011(b).	l am the cr						
	_	editor's attorney or authorized agent.					
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  I am a quarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules specifying what a signature	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the						
is.	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on da	on date					
	/s/ Lisa N	1. Norman Sisam Norman					
		of the person who is completing and signing this claim:					
	Name	Lisa M. Norman  First name Middle name Last name					
	Title	Attorney					
	Company	Andrews Myers, PC					
		Identify the corporate servicer as the company if the authorized agent is a servicer.					
	Address	1885 St. James Place, 15th Floor					
		Number Street					
		Houston         TX         77056           City         State         ZIP Code	)				
			مان در دست به مان د				
	Contact phone	713-850-4200 Email Lnorman@a	ndrewsmyers.com				

Last Name of Claimant	Simecek
First Name of Claimant	Dawn
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Boca Chica, Florida
Accident Description	Claimant experienced a sudden loss ofpower to her vehicle, causing her to lose control and hit a tree head-on, resulting in severe and permanent injuries to Claimant
Injury Description	Traumatic Brain Injury
Airbag Deployed	No
Date of Injury	11/02/07
Year and Model of Vehicle	2006 Chevrolet Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:								
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors								
Debtor 2 (Spouse, if filing								
United States Bankruptcy Court for the: Southern District of New York								
Case number	09-50026 (REG)							

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

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Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

١.	Who is the current creditor?		ditor (the person or e	entity to be paid for this cl			
	Has this claim been acquired from someone else?	No Yes, From who	m?				
	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notice Andrews Myers,			Where should pay different)	yments to the creditor	be sent? (if
				Number Street			
		Houston TX		77056			
		Contact phone 713-8  Contact email Lnorr		ZIP Code myers.com	City  Contact phone  Contact email	State	
		Uniform claim identifier for electronic payments in chapter 13 (if you					
	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court claim	s registry (if known) _		Filed on	O / YYYY
	Do you know if anyone else has filed a proof of claim for this claim?	✓ No ☐ Yes. Who made	e the earlier filing?				

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3.	Do you have any number you use to identify the debtor?	✓ No ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.	How much is the claim?	Does this amount include interest or other charges?  □ No □ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).					
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  Personal injury claim - ignition switch					
	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property:  Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.  Other. Describe:  Basis for perfection:  Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  Value of property:  \$					
		Amount of the claim that is secured: \$  (The sum of the secured and unsecured amounts should match the amount in line 7.					
		Annual Interest Rate (when case was filed)%  Fixed Variable					
0	. Is this claim based on a lease?	✓ No  ☐ Yes. Amount necessary to cure any default as of the date of the petition.  \$					
1	. Is this claim subject to a right of setoff?	✓ No  ☐ Yes. Identify the property:					

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40 to all an earl of the claim	<b>☑</b> No					
12. Is all or part of the claim entitled to priority under	Yes. Check	one			Amount entitled to priorit	
11 U.S.C. § 507(a)?	_				Amount entitled to priorit	
A claim may be partly priority and partly		ic support obligations (including alimo C. § 507(a)(1)(A) or (a)(1)(B).	ny and child support) un	der	\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ persona	\$				
entitled to priority.	bankruj	salaries, or commissions (up to \$12,8 tcy petition is filed or the debtor's bus C. § 507(a)(4).	350*) earned within 180 o iness ends, whichever is	days before the earlier.	\$	
		r penalties owed to governmental unit	s. 11 U.S.C. § 507(a)(8)		\$	
	☐ Contrib	utions to an employee benefit plan. 11	U.S.C. § 507(a)(5)		\$	
		Specify subsection of 11 U.S.C. § 507			\$	
					7	
	* Amounts	are subject to adjustment on 4/01/19 and ev	very 3 years after that for ca	ses begun on or afte	er the date of adjustment,	
Part 3: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must	☐ I am the cre	, aditor				
sign and date it. FRBP 9011(b).		editor's attorney or authorized agent.				
If you file this claim	_	stee, or the debtor, or their authorized	agent, Bankruotov Rule	3004.		
electronically, FRBP	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
5005(a)(2) authorizes courts to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a	amount or the c	ain, the cleditor gave the debtor cled	it for any payments rece	ived toward the de	5 <b>0</b> ι.	
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 08/24/2017					
		MINI / DD / TTTT				
	/s/ Lisa N	1. Norman Kisar	n. Dorma	20		
	Signature					
	Print the name	of the person who is completing ar	nd signing this claim:			
	Name	Lisa M. Norman				
			dle name	Last name		
	Title	Attorney				
	Company	Andrews Myers, PC Identify the corporate servicer as the co	mpany if the authorized age	nt is a servicer		
	Address	1885 St. James Place, 15th	Floor			
		Number Street		77050		
		Houston	TX	77056		
		City	State	ZIP Code		
	Contact phone	713-850-4200	Fmail	_norman@and	frewsmyers.com	

Last Name of Claimant	Simpson
First Name of Claimant	Lynette
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Troy, Ohio
Accident Description	Claimant was the driver of a vehicle that was struck head-on by another vehicle, resulting in severe and permanent injuries to Claimant
Injury Description	Shattered Knee Cap; Knee Reconstruction
Airbag Deployed	No
Date of Injury	01/02/09
Year and Model of Vehicle	2007 Chevrolet HHR
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:							
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭						
Debtor 2 (Spouse, if filing)	-						
United States	Bankruptcy Court for the: Southern District of New York						
Case number	09-50026 (REG)						

#### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the Information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

P	art 1: Identify the Cl	aim		_				
1.	Who is the current creditor?	Austin Slade  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor						
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?	,					
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, F	PC - ATTN: Li	sa M. Norman	Where should p different)	ayments to the creditor	be sent? (if	
		Number Street Houston City Contact phone 713-85	TX State 0-4200	77056 ZIP Code		State		
		Contact email Lnorma Uniform claim identifier for	r electronic payme					
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numbe	er on court claim	s registry (if known)		Filed on	O / YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the	he earlier filing?		_			

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<b>.</b>	Do you have any number you use to identify the debtor?	☑ No ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:				
	How much is the claim?	s Does this amount include interest or other charges?  No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
		Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.				
	claim?	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).				
		Limit disclosing information that is entitled to privacy, such as health care information,				
		Personal injury claim - ignition switch				
	Is all or part of the claim secured?	✓ No ☐ Yes. The claim is secured by a lien on property.				
		Nature of property:				
		Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.				
		☐ Motor vehicle				
		Other. Describe:				
		Basis for perfection:				
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)				
		Value of property: \$				
		Amount of the claim that is secured: \$				
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7				
		Amount necessary to cure any default as of the date of the petition: \$				
		Annual Interest Rate (when case was filed)%				
		Fixed				
		☐ Variable				
)	ls this claim based on a	☑ No				
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.				
	. Is this claim subject to a right of setoff?	☑ No				
	right of seton r	☐ Yes. Identify the property:				

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<ol><li>Is all or part of the claim entitled to priority under</li></ol>	<b>☑</b> No					
11 U.S.C. § 507(a)?	Yes. Check	one:			Amount entitled to priorit	
A claim may be partly priority and partly		c support obligations (including alimony and chi C. § 507(a)(1)(A) or (a)(1)(B).	ild support) un	der	\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		2,850* of deposits toward purchase, lease, or rei I, family, or household use. 11 U.S.C. § 507(a)(		y or services for	\$	
orning to priority.	bankruj	salaries, or commissions (up to \$12,850*) earne toy petition is filed or the debtor's business ends D. § 507(a)(4).			\$	
	Taxes of	r penalties owed to governmental units. 11 U.S.	C. § 507(a)(8)		\$	
	☐ Contrib	itions to an employee benefit plan. 11 U.S.C. §	507(a)(5).		\$	
	_	pecify subsection of 11 U.S.C. § 507(a)() tha			\$	
		re subject to adjustment on 4/01/19 and every 3 years		ses begun on or aft	er the date of adjustment.	
Part 3: Sign Below						
	Observation and					
The person completing this proof of claim must	Check the appro					
sign and date it. FRBP 9011(b).	☐ I am the cre	ditor. ditor's attorney or authorized agent.				
ou file this claim		attorney or authorized agent. stee, or the debtor, or their authorized agent. Ba	ankruptov Rule	3004.		
electronically, FRBP	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
005(a)(2) authorizes courts of establish local rules pecifying what a signature s.						
	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on da	e 08/24/2017				
		0		1		
	/s/ Lisa N	I. Norman	100mg	ur		
	Print the name	of the person who is completing and signing	this claim:			
	Name	Lisa M. Norman First name Middle name		Last name		
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the company if the	e authorized age	ent is a servicer.		
	Address	1885 St. James Place, 15th Floor				
		Number Street	TX	77056		
		Houston City	State	ZIP Code		

Last Name of Claimant	Slade
First Name of Claimant	Austin
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Casa Grande, Arizona
Accident Description	Claimant lost control of his vehicle, resulting in severe and
	permanent injuries to Claimant
Injury Description	Brain Injuries; Broken Vertebrae in back and neck; Grand Mal Seizures; Blind in Left Eye; Kidney Failure; Headache; Right Shoulder Injury requiring surgery; Rib Fractures; Removal of Gall Bladder
Airbag Deployed	No
D-46I	02/20/06
Date of Injury	03/29/06
Year and Model of Vehicle	2005 Chevrolet Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:								
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭							
Debtor 2 (Spouse, if filing)								
United States Bankruptcy Court for the: Southern District of New York								
Case number	09-50026 (REG)							

#### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	Shakiria Stephen Name of the current cred Other names the creditor	litor (the person or e	entity to be paid for this cla	aim)		
2.	Has this claim been acquired from someone else?	No Yes. From whom					
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman			Where should payed different)	ments to the creditor	be sent? (if
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James Place, 15th Floor		Name			
	(I NDI ) 2002(g)	Number Street		*	Number Street		
		Houston	TX	77056			
		Contact phone 713-8: Contact email Lnorm		ZIP Code myers.com		State	
		Uniform claim identifier f		nts in chapter 13 (if you u			
	Does this claim amend one already filed?	☑ No ☐ Yes, Claim numb	per on court claim	s registry (if known) _	·	Filed on	) / YYYY
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?				

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3. What is the claim?  9. Is all or particle secured?	ou have any number use to identify the or?	☑ No ☐ Yes. Last 4 digits of the debtor's account or any nur	nber you use to identif	y the debtor:
claim?  Is all or pa secured?	much is the claim?	s unliquidated. Does this are	nount include interes	t or other charges?
claim?  O. Is all or pa secured?				interest, fees, expenses, or other ruptcy Rule 3001(c)(2)(A).
o. is all or pa secured?	is the basis of the	Examples: Goods sold, money loaned, lease, services		
secured?	•	Attach redacted copies of any documents supporting th		
secured?		Limit disclosing information that is entitled to privacy, su	ıch as health care info	rmation.
secured?		Personal injury claim - ignition switch		
	or part of the claim red?	No Yes. The claim is secured by a lien on property.  Nature of property:		
		☐ Real estate. If the claim is secured by the Attachment (Official Form 41☐ Motor vehicle☐ Other. Describe:		
		Basis for perfection:	th at -h a dalaman at	in the state of a convincing integral (for
		Attach redacted copies of documents, if any, example, a mortgage, lien, certificate of title, been filed or recorded.)	financing statement, o	r other document that shows the lien has
		Value of property: \$		
		Amount of the claim that is secured: \$		
		Amount of the claim that is unsecured: \$		(The sum of the secured and unsecured amounts should match the amount in line 7.
		Amount necessary to cure any default as	of the date of the pet	ition: \$
		Annual Interest Rate (when case was filed)	96	
		☐ Fixed		
		Variable		
	s claim based on a	<b>☑</b> No		
lease?	?	☐ Yes. Amount necessary to cure any default as o	f the date of the petif	tion. \$
	s claim subject to a	<b>☑</b> No		
right of se	of setoff?	☐ Yes. Identify the property:		

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12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	cone:				Amount entitled to priority
A claim may be partly priority and partly	<ul> <li>□ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</li> <li>□ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</li> </ul>					\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.						\$
chance to phonty.	bankrup	salaries, or commissions (upotcy petition is filed or the deb C. § 507(a)(4).				\$
	☐ Taxes o	or penalties owed to governm	ental units. 11 U.S.C. § 50	07(a)(8)		\$
	☐ Contrib	utions to an employee benefi	t plan. 11 U.S.C. § 507(a)	(5).		\$
		Specify subsection of 11 U.S.				\$
		are subject to adjustment on 4/01	—		ses begun on or aff	ter the date of adjustment.
Part 3: Sign Below						
The person completing	Check the appro	opriate box:				
this proof of claim must	☐ I am the cre	nditor				
sign and date it. FRBP 9011(b).	- /		l acout			
you file this claim	_	editor's attorney or authorized	_	ay Dula	2004	
ectronically, FRBP 005(a)(2) authorizes courts	_	istee, or the debtor, or their a	•	•		
	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules specifying what a signature						
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a	amount of the G	aim, the creditor gave the de	bior credit for any paymer	ils recei	ved toward the c	iebt.
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under	penalty of perjury that the for	egoing is true and correct.			
3571.	Executed on da	te 09/19/2017				
		. 0				
	/s/ Lisa N	1. Norman	sdm.Da	2m	an	
	Print the name	of the person who is comp	leting and signing this o	aim:		
	Name	Lisa M. Norman				
		First name	Middle name		Last name	
	Title	Attorney				
	Company	Andrews Myers, PC			-41	
		Identify the corporate servicer	as the company if the author	ized age	nt is a servicer.	
	Address	1885 St. James Plac	e, 15th Floor			
		Number Street				
		Houston		TX	77056	
		City		State	ZIP Code	
	Contact phone	713-850-4200		Email L	norman@an	drewsmyers.com

Last Name of Claimant	Stephenson
First Name of Claimant	Shakiria
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Hillsboro, FL
Accident Description	Client skidded off the road and the vehicle rolled several times
Injury Description	Broken collarbone
Airbag Deployed	No
Date of Injury	00/00/2007
Year and Model of Vehicle	2004 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No.
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this	Fill in this information to identify the case:								
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭								
Debtor 2 (Spouse, if filin	g)								
United States Bankruptcy Court for the: Southern District of New York									
Case numbe	09-50026 (REG)								

### **Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

١.	Who is the current creditor?		editor (the person or	entity to be paid for this cl	•		
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From who	m?				
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Andrews Myers, PC - ATTN: Lisa M. Norman  Name  1885 St. James Place, 15th Floor			Where should pay different)	yments to the creditor	be sent? (if
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)				Name		
	,,	Number Street		Number Street			
		Houston	TX	77056			
		Contact phone 713-8 Contact email Lnorr		zip Code	City  Contact phone  Contact email	State	
		Uniform claim identifier		ents in chapter 13 (if you u			
	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court clain	ns registry (if known) _		Filed on	D / YYYY
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	e the earlier filing?				

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	art 2: Give Information	ion About the Claim as of the Date the Case Was Filed							
3.	Do you have any number you use to identify the debtor?	No □ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:							
<b>,</b>	How much is the claim?	\$ UNIQUIDATED Does this amount include interest or other charges?							
		Yes. Attach statement itemizing interest, fees, expense charges required by Bankruptcy Rule 3001(c)(2)(a)	s, or other A).						
3.	What is the basis of the claim?								
	Claimr	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).							
		Limit disclosing information that is entitled to privacy, such as health care information.							
		Personal injury claim - ignition switch							
9.	is all or part of the claim secured?	No Yes. The claim is secured by a lien on property.  Nature of property:							
		<ul> <li>□ Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage         Attachment (Official Form 410-A) with this Proof of Claim.</li> <li>□ Motor vehicle</li> <li>□ Other. Describe:</li> </ul>	Proof of Claim						
		Basis for perfection:  Attach redacted copies of documents, if any, that show evidence of perfection of a security example, a mortgage, lien, certificate of title, financing statement, or other document that s been filed or recorded.)	interest (for hows the lien has						
		Value of property:							
		Amount of the claim that is secured:							
		Amount of the claim that is unsecured: \$(The sum of the secure amounts should match							
		Amount necessary to cure any default as of the date of the petition:							
		Annual Interest Rate (when case was filed)%  Fixed Variable							
0.	Is this claim based on a	<b>☑</b> No							
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.							
		a ☑ No							
11.	Is this claim subject to a right of setoff?	- 44 110							

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2. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	one:			Amount entitled to priori	
A claim may be partly priority and partly	Domest 11 U.S.	\$				
nonpriority. For example, in some categories, the law limits the amount	Up to \$3 persons	\$				
entitled to priority.	bankrup	salaries, or commissions (up to \$12,850 tcy petition is filed or the debtor's busine C. § 507(a)(4).			\$	
		r penalties owed to governmental units.	11 U.S.C. § 507(a)(8)		\$	
	☐ Contrib	tions to an employee benefit plan. 11 U.	.S.C. § 507(a)(5).		\$	
		pecify subsection of 11 U.S.C. § 507(a)			\$	
	* Amounts	re subject to adjustment on 4/01/19 and every	/ 3 years after that for ca	ses begun on or aft	er the date of adjustment,	
Part 3: Sign Below	_					
he person completing	Check the appro	priate box:				
nis proof of claim must ign and date it. RBP 9011(b).	☐ I am the cre	ditor.				
	/	ditor's attorney or authorized agent.				
f you file this claim electronically, FRBP		stee, or the debtor, or their authorized ag	nent Bankruptov Rule	3004.		
	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
005(a)(2) authorizes courts establish local rules	Turn a guaranter, earlety, errearies, or earler escapitor parintapley reare esses.					
pecifying what a signature			£ 01= i		that when calculating the	
onlying what a dignatare	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
person who files a						
raudulent claim could be ined up to \$500,000, mprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
rears, or both. 8 U.S.C. §§ 152, 157, and	l declare under	enalty of perjury that the foregoing is tru	ue and correct.			
3571.	Executed on da	e 08/24/2017				
		MINI / DD / TTTT				
	/o/ Lico N	Norman Scam	Osoma	0		
	Signature	l. Norman	DORMO			
	Signature					
	Print the name	of the person who is completing and	signing this claim:			
	Name	Lisa M. Norman				
	TTGING	First name Middle	name	Last name		
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the comp	any if the authorized age	ent is a servicer.		
		1885 St. James Place, 15th Fl	loor			
	Address	Number Street	1001			
		Houston	TX	77056		
		-	State	ZIP Code		
		City			encovocana sica. Am isana	
	Contact phone	713-850-4200	Email <b>l</b>	_norman@an	drewsmyers.com	

Last Name of Claimant	Stafford, Deceased
First Name of Claimant	Theodore
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Ypsilanti, Michigan
Accident Description	Claimant lost control of his vehicle, hit a pole, the car burst into flames, resulting in fatal injuries to Claimant
Injury Description	Death
Airbag Deployed	No
Date of Injury	02/25/07
Year and Model of Vehicle	2005 Chevrolet Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.